



Fire Marshal's Office

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ANNUAL FIRE INSPECTION APPLICATION & SCHEDULE OF FEES **FOR LICENSED/REGISTERED FACILITIES**

Name of business: _____ Date of Application _____

Address: _____

Contact Person: _____ Phone #: _____ Fax #: _____

Signature _____

Annual Inspection Fees

_____ \$35.00	Childcare facility
_____ \$35.00	Home-based childcare
_____ \$125.00	Healthcare facility/nursing home
_____ \$150.00	Hospital/clinic
_____ \$35.00	Foster care/adoption
_____ \$35.00	Home based healthcare
_____ \$35.00	Other _____

\$ _____ **TOTAL PERMIT FEES**